U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if known FEE TRANSMITTAL **Application Number** 10/725,393 December 3, 2003 Filing Date **Ajay Gupta** First Named Inventor Patent fees are subject to annual revision. Foreman, Jonathan ML **Examiner Name Art Unit** ☑Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$60.00) 48354-0001-00-US (228150) Attorney Docket No. **METHOD OF PAYMENT** (check all that apply) ☑ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_ Deposit Account Number 50-0573 Deposit Account Name Drinker Biddle & Reath LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ☐ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee ☑ Charge any additional fee required under 37 CFR 1.16 and 1.17 ▼ Credit any overpayments FEE CALCULATION 1. Basic Filing, Search and Examination Fees **Application Type** Filing Fees Search Fees **Examination Fees** Fees Paid **Small Entity Small Entity** Small Entity Utility 300 150 500 200 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 80 160 Reissue 300 150 500 250 600 300 Provisional 100 0 n 0 0 2. Excess Claim Fees Fee Description Small Entity Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims <u>Fee</u> Fee Paid **Multiple Dependent Claims** Fee Fee Paid 0 - 20 =0 0 0 Indep. Claims Extra Claims <u>Fee</u> Fee Paid 0 - 3 = $0 \times$ 3. Application Size Fee If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof **Fee** Fee Paid 0 - 100 =/50 =0 (round up to a whole number) × 0 4. Other Fee(s) Fees Paid Non-English Specification, \$130 fee (no small entity discount) Other: \_ One Month Extension of Time 60.00

Registration No.

(Attorney/Agent)

Complete (if applicable)

Telephone

Date

(215) 988.2700

October 3, 2007

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Signature

Name (Print/Type)

SUBMITTED BY CUSTOMER NO. 23973

Larry S. Zelson, Esq..

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		48354-0001-00-US		
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	App A cl Pay The Acc The any encles	pplication of: Ajay Gupta ation No. 10/725,393  Lethod and Combination Electronic Commecting/Monitoring Neuropathy  3736  a request under the provisions of 37 CFR 1.13 dentified application.  Luested extension and appropriate non-small-e  X One month (37 CFR 1.17(a)(1))  Two months (37 CFR 1.17(a)(2))  Three months (37 CFR 1.17(a)(3))  Four months (37 CFR 1.17(a)(4))  Five months (37 CFR 1.17(a)(5))  Applicant claims small entity status. See A check in the amount of the fee is enclowed any overpayment, to Deposit Account.  The Director has already been authorized Account.  The Director is hereby authorized to chast any overpayment, to Deposit Account Nenclosed.  E  Applicant/inventor  Assignee of record of the entire CFR 3.73(b) is enclosed. (Form X Attorney or agent of record.  Attorney or agent of record undo Registration number if acting und	replication of: Ajay Gupta ation No. 10/725,393  Filed December 3, 2003  Rethod and Combination Electronic Communication and Medical Electing/Monitoring Neuropathy  3736  Examiner: J. FOREMAN  Request under the provisions of 37 CFR 1.136(a) to extend the period for dentified application.  Respectively application  Large Entity  X One month (37 CFR 1.17(a)(1))  Two months (37 CFR 1.17(a)(2))  Four months (37 CFR 1.17(a)(3))  Four months (37 CFR 1.17(a)(4))  Five months (37 CFR 1.17(a)(4))  Five months (37 CFR 1.17(a)(5))  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to charge fees in this and Account.  The Director is hereby authorized to charge any fees which may be any overpayment, to Deposit Account Number 50-0573. A copy enclosed.  Papplicant/inventor  Assignee of record of the entire interest. See 37 CFR 3.7 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  X Attorney or agent of record.  Attorney or agent of record under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a).	